PAGE 1 / 16

Image# 201601319004975477

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIWI 3A	For Other Than An	Authorized C	ommittee			Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Exampl	le: If typing, t	ype	12FE4M5	Times coo only	
COMMITTEE (in full)		over th			12FE4M5		
Seagrass PAC							1
ADDRESS (number and street)	610 S. Boulevard						
Check if different							
than previously reported. (ACC)	Tampa				FL L	33606	-
2. FEC IDENTIFICATION N	JMBER ▼	CITY 🛦		S	TATE 🛦	ZIP CC	DDE 🛦
C C00563338		3. IS THIS REPORT	X NEW	OR	AM (A)	IENDED	
4. TYPE OF REPORT	(b) Monthly	Feb 20 (M2)	May	20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election
(Choose One)	Report Due On:	Mar 20 (M3)	Jun	20 (M6)	Sep	20 (M9)	Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		, ,	H	, ,			Year Only)
April 15 Quarterly Report (0)1)	Apr 20 (M4)	Jul 2	20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
July 15	(C) 12-Day		mary (12P)		General (12G)	Runoff (12R)
Quarterly Report (C	Report for th	he: Co	nvention (12C))	Special (12S)	
Quarterly Report (C	23)	г	M M / D	D /	Y	in the	
January 31 Year-End Report (\)	/E)	Election on				State of	of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	POST-Election		neral (30G)		Runoff (3	0R)	Special (30S)
Termination Report (TER)	Report for the	ie.	M M / D	D /	Y = Y = Y	in the	
(1211)	E	lection on	<u></u>			State of	of
5. Covering Period 07		015	through	M M 12	/ D D /	2015	
I certify that I have examined the	nis Report and to the be	st of my knowled	dge and belie	of it is true	e, correct and	complete.	
Type or Print Name of Treasure	er Nancy H. Watkins						
Signature of Treasurer Nanc	cy H. Watkins	[Eld	ectronically File	ed] Da	ate 01	/ 31 /	2016
NOTE: Submission of false, erron	eous, or incomplete inforr	mation may subjec	ct the person	signing thi	s Report to th	e penalties of 2	U.S.C. §437g.
Office		7 31				FEC FOR	
Use Only						Rev. 12/2	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Seagrass PAC 07 2015 2015 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 9527.20 January 1, 2015 (b) Cash on Hand at 26027.20 Beginning of Reporting Period..... 66100.00 26600.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 52627.20 75627.20 6(a) and 6(c) for Column B)..... 28273.58 51273.58 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 24353.62 24353.62 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Seagrass	PAC
----------	-----

Report Covering the Period: From: 07	01 2015 To	: 12 31 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	-	
(a) Individuals/Persons Other		
Than Political Committees	500.00	15500.00
(i) Itemized (use Schedule A)	7	
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	500.00	15500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	10000.00	
(such as PACs)	16000.00	31500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	16500.00	47000.00
Totals to Line 33, page 5)	10000.00	47000.00
. Transfers From Affiliated/Other	40400.00	19100.00
Party Committees	10100.00	19100.00
. All Loans Received	0.00	0.00
All Louis riccoved		
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	26600.00	66100.0
_		
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	26600.00	66100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN B Calendar Year-to-Date			
1. O	perating Expenditures: Activity (from Schoolule H4)	Total This Period	Calcinda Tear-to-Date		
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
	(i) Tederal Share				
	(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
	Expenditures	10073.58	13073.58		
(C	, , ,				
_	(add 21(a)(i), (a)(ii), and (b))▶	10073.58	13073.58		
	ansfers to Affiliated/Other Party	0.00	0.00		
С	ommitteesontributions to	0.00	0.00		
ar	ederal Candidates/Committees nd Other Political Committees	16200.00	36200.00		
	dependent Expenditures	0.00	0.00		
С	se Schedule E)ordinated Party Expenditures	0.00	0.00		
(2	U.S.C. §441a(d)) se Schedule F)	0.00	0.00		
(u	se Scriedule F)	7 7	0.00		
10	pan Repayments Made	0.00	0.00		
		7			
Lo	pans Made	0.00	0.00		
R (a	efunds of Contributions To:) Individuals/Persons Other				
(0	Than Political Committees	0.00	0.00		
(b	,	0.00	0.00		
(c	•		0.00		
	(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(0	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
	(444 21100 20(4), (5), 4114 (5),	7			
0	ther Disbursements	2000.00	2000.00		
F	ederal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
	(from Schedule H6)	0.00	0.00		
	(i) Federal Share	0.00	0.00		
	(ii) III aviiali Oh ana	0.00	0.00		
(h	(ii) "Levin" Share) Federal Election Activity Paid Entirely	0.00	4		
(b	With Federal Funds	0.00	0.00		
(c					
, ,	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
To	otal Disbursements (add Lines 21(c), 22,				
23	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	28273.58	51273.58		
		7			
	otal Federal Disbursements				
	ubtract Line 21(a)(ii) and Line 30(a)(ii)	00070 50	54070 50		
fro	om Line 31)▶	28273.58	51273.58		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page **5**

III. Net Contributions/Operating Expenditures	· · · · · · · · · · · · · · · · · · ·		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	16500.00	47000.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16500.00	47000.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	10073.58	13073.58	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	10073.58	13073.58	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Seagrass PAC Full Name (Last, First, Middle Initial) Gregory M. Lankler Date of Receipt Mailing Address 1550 Pennyroyal Lane 07 02 2015 City Zip Code State Transaction ID: SA11AI.4169 MD Rockville 20853 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Mercury, LLC managing director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 1 (check only one)							
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17							
Any information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) Seagrass PAC									
,	tate Zip Code A 22202	Date of Receipt 08 24 2015 Transaction ID: SA11C.4190							
FEC ID number of contributing federal political committee.	1	Amount of Each Receipt this Period 2500.00							
Receipt For: Primary General Other (specify) Other	gregate Year-to-Date ▼ 2500.00								
Full Name (Last, First, Middle Initial) FedExPAC Federal Express PAC Mailing Address 942 S. Shady Grove Road		Date of Receipt							
Memphis T FEC ID number of contributing	1	09 29 2015 Transaction ID : SA11C.4198 Amount of Each Receipt this Period 5000.00							
rederal political committee.	upation								
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 5000.00								
Full Name (Last, First, Middle Initial) Raytheon Company PAC Mailing Address 1100 Wilson Blvd., #1500		Date of Receipt							
•	tate Zip Code 'A 22209	12 05 2015 Transaction ID : SA11C.4219 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C00097568	5000.00							
	upation								
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 5000.00								
SUBTOTAL of Receipts This Page (optional)		12500.00							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 16 (check only one) 11a 11b X 11c 12 13 14 15 16 17
or	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Seagrass PAC			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Regions Financial Corporation PAC Mailing Address 1015 15th Street, N.W., #920 City Washington FEC ID number of contributing			Zip Code 20005	Date of Receipt 10 31 2015 Transaction ID : SA11C.4203 Amount of Each Receipt this Period
	federal political committee. Name of Employer Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation	0432252 Year-to-Date ▼ 1000.00	
B.	Full Name (Last, First, Middle Initial) United Parcel Service, Inc. PAC Mailing Address 55 Glenlake Parkway, N.E. City Atlanta FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation	Zip Code 30328 0064766 Year-to-Date ▼	Date of Receipt 08 10 2015 Transaction ID: SA11C.4186 Amount of Each Receipt this Period 2500.00
C.	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt Amount of Each Receipt this Period
s	UBTOTAL of Receipts This Page (optional)			3500.00

16000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 16 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Seagrass PAC	statements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) The Jolly Victory Committee Mailing Address 610 S. Boulevard City Tampa FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code FL 33606 C C00565028 Occupation Aggregate Year-to-Date ▼	Date of Receipt 07 21 2015 Transaction ID : SA12.4174 Amount of Each Receipt this Period 10100.00 transfer from auth.
Full Name (Last, First, Middle Initial) Leo J. Govoni Mailing Address 4912 Creekside Drive City Clearwater FEC ID number of contributing federal political committee. Name of Employer Boston Finance Group, LLC Receipt For: Primary General Other (specify)	State Zip Code FL 33760 C Occupation chairman Aggregate Year-to-Date ▼ 5000.00	Date of Receipt M M / 29 2015 Transaction ID: SA12.4174.0 Amount of Each Receipt this Period 5000.00 [MEMO ITEM]
Full Name (Last, First, Middle Initial) Paul G. Casner Jr. Mailing Address 15237 Callaway Court City Glenwood FEC ID number of contributing federal political committee. Name of Employer Atair Aerospace Receipt For: Primary General Other (specify)	State Zip Code MD 21738 C Occupation c.e.o. Aggregate Year-to-Date ▼	Date of Receipt 06 29 2015 Transaction ID: SA12.4174.1 Amount of Each Receipt this Period 100.00 [MEMO ITEM]
SUBTOTAL of Receipts This Page (optional)	····	10100.00

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 10 OF 16								
ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
• •	LIVIIZED ILECTIFIS		for each category of the Detailed Summary Page	11a 11b 11c X 12								
_			, ,	13 14 15 16 17								
Ar	ny information copied from such Reports and	Statements m	ay not be sold or used by any paddress of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
01	NAME OF COMMITTEE (In Full)	ic riame and a	duress of any political committee	5 to solicit contributions from such committee.								
$ \rangle$	Seagrass PAC											
	Ocagiass i 710											
	Full Name (Last, First, Middle Initial)											
A.		Date of Receipt										
	Mailing Address 5412 Lykes Lane			M = M / D = D / Y = Y = Y								
	City	State	Zip Code	06 30 2015								
	Tampa	FL	33611	Transaction ID : SA12.4174.2 Amount of Each Receipt this Period								
	· ·			Amount of Each necespt this Feriod								
	FEC ID number of contributing federal political committee.	C		5000.00								
	Name of Employer	Occupation	1	_								
	Publix Supermarkets, Inc.	director										
	Receipt For:	Aggregate	Year-to-Date ▼	[MEMO ITEM]								
	Primary General	Aggregate	Total to Date V	[memorrem]								
	Other (specify) ▼		5000.00									
_	Full Names (Lost First Middle Initial)											
В.	Full Name (Last, First, Middle Initial)	Date of Receipt										
٠.	Mailing Address	M = M / D = D / Y = Y = Y										
	City											
				Amount of Each Receipt this Period								
	FEC ID number of contributing	С										
	federal political committee.			7 7 7								
	Name of Employer	Occupation	1									
	Receipt For:			_								
	Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		<u> </u>									
				4								
^	Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)										
C.	Mailing Address			Date of Receipt								
	Mailing Address			M = M / D = D / Y = Y = Y								
	City	State	Zip Code									
				Amount of Each Receipt this Period								
	FEC ID number of contributing	С										
	federal political committee.											
	Name of Employer	Occupation	1	_								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			1								
	Other (specify) ▼			J								
Г												
s	SUBTOTAL of Receipts This Page (optional))	0.00								
\vdash				40400.00								
Iт	OTAL This Period (last nage this line number	r only)		10100.00								

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SCHEDULE B (FEC Form 3X)		FOR LINE	PAGE 11 OF 16	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	ie and address of any point	oar committee te	Solioit Contributions 1	Tom odom committee.
Seagrass PAC				
Full Name (Last, First, Middle Initial)				
A. Angry Pepper Waterside Smokesh	ack		Date of Disbursem	
Mailing Address 4330 Duhme Road			11 12	2015
City	State Zip Code		Transaction ID :	SD21D 4215
Madeira Beach	FL 33708		Transaction ib .	36216.4213
Purpose of Disbursement catering			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		595.99
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)	7 1	,	
State: District:				
Full Name (Last, First, Middle Initial) B. Angry Pepper Waterside Smokesh	ack		Date of Disbursem	nent
Trigry i oppor vvatorolao emokoon	aon		M = M / D = D	/
Mailing Address 4330 Duhme Road			11 18	2015
City Madeira Beach	State Zip Code FL 33708		Transaction ID :	SB21B.4217
Purpose of Disbursement catering		· · ·	Amount of Each D	hisbursement this Period
Candidate Name		Category/ Type		504.01
Office Sought: House Disburser	nent For:	1,500	,	
Senate President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. Decker Consulting Services			Date of Disbursem	nent
Booker Cornaditing Corvided			M M / D D	/
Mailing Address 244 14th Place, N.E., #2			07 09	2015
•	State Zip Code		Transaction ID :	SB21B.4173
Washington Purpose of Disbursement	DC 20002			
fundraising event			Amount of Foob D	Nichuraamant this Daviad
Candidate Name	Category/ Type	hisbursement this Period 1820.78		
Office Sought: House Disburser	nent For:	турс		
Senate President	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····		2920.78
TOTAL This Period (last page this line number only)				

S	CHEDULE B (FEC Form 3X)			T -	<u>∩</u> □	LINE NUMBER: PAGE 12 OF 16										
	EMIZED DISBURSEMENTS		arate schedule(s)		_	k only	-)CK	•			PAGE 12 UF 16				
			category of the Summary Page	`		21b							25	5 3	26	
		Dotalieu				27		8a		28b		28	c	29		301
	y information copied from such Reports and Stater															s
or	for commercial purposes, other than using the nar	ne and add	ress of any politi	cal cor	nmit	ttee to	solici	t co	ntrik	oution	s fi	rom s	uch c	commi	ttee.	
	NAME OF COMMITTEE (In Full)															
[/	Seagrass PAC															
_	Full Name (Last, First, Middle Initial)										_					
A.	Decker Consulting Services						Date of Disbursement									
							M	- M	/	D	D	1	Υ	Y Y	I Y	
	Mailing Address 244 14th Place, N.E., #2							80		(05		2	2015		
	City	State	Zip Code			-					—					
	Washington	DC	20002				Т	rans	sact	ion II):	SB21	B.418	35		
	Purpose of Disbursement					_										
	fundraising consulting			Ι.			Am	oun	t of	Each	ı D	isburs	semer	nt this	Peri	bc
	Candidate Name				egoi				T					155	0.00	\Box
	Office Sought House	mont For		Т	ype			-	+	7	_			.00	3.30	
	Office Sought: House Disburser Senate	ment For: Primary	General													
	President	Other (spe														
	State: District:	` .	•													
	Full Name (Last, First, Middle Initial)															
В.	Republican Party of Florida						Da	te o	f Di	sburs	em	ent				
						M = M / D = D / Y = Y = Y										
	Mailing Address 420 E. Jefferson Street						11 05 2015									
	City	State Zip Code				-	Transaction ID : SB21B.4208									
	Tallahassee	FL	32301				Т	rans	sact	ion II):	SB21	B.420	08		
	Purpose of Disbursement dinner tickets				_	\neg	1									
					Amount of Each Disbursement this Period								od			
	Candidate Name				egor									100	00.00	
	Office Sought: House Disburser	ment For:		'	ype			-		7						
	Senate	Primary	General													
	President	Other (spe	cify) 🔻													
	State: District:															
	Full Name (Last, First, Middle Initial)															
C.	Robert Watkins & Company						Da	te o	f Di	sburs	em	ent				
	Mailing Address 610 S. Boulevard					-	M	∎ м 10	7		30	/		y y y 2015	Y	
	Walling Address 610 S. Bodievard							10			,,			-010		l
	City	State	Zip Code					ranc	eact	ion II	<u> </u>	SB21	B.420	12		
	Tampa	FL	33606				•	Iaiis	saci		٠.	3DZ I	D.42(<i>,</i>		
	Purpose of Disbursement accounting services										_					
Candidate Name					-	_	Amount of Each Disbursement this Period								od	
	California (Carro				egoi ype		3600.0							0.00		
	Office Sought: House Disburser	ment For:			,,			_		,						
	Senate	Primary	General													
	President	Other (spe	cify) ▼													
_	State: District:										_					
							Г							615	0.00	
Ls	UBTOTAL of Disbursements This Page (optional)					<u> </u>	L			7				313	5.00	
 	OTAL This Period (last page this line number only))														
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SCHEDULE B (FEC Form 3X)												
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)									
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or us me and address of any politi	sed by any persocal committee to	on for the purpose solicit contributions	of soliciting contributions s from such committee.								
NAME OF COMMITTEE (In Full)												
Seagrass PAC												
Full Name (Last, First, Middle Initial)			5									
A. Robert Watkins & Company			Date of Disbursement									
Mailing Address 610 S. Boulevard			12 0	2015								
City	State Zip Code			OD04D 4040								
Татра	FL 33606		Transaction ID) : SB21B.4218								
Purpose of Disbursement accounting services			Amount of Each	Disbursement this Period								
Candidate Name		Category/ Type		600.00								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:	,											
Full Name (Last, First, Middle Initial) B. Sandy Wasson & Associates Insu	rance		Date of Disburse	ement								
			M M / D	D / Y Y Y Y Y								
Mailing Address 9.67 Belcher Road, N.			11 (2015								
City Pinellas Park	State Zip Code FL 33782		Transaction ID : SB21B.4206									
Purpose of Disbursement insurance			Amount of Each	Disbursement this Period								
Candidate Name		Category/ Type		268.69								
Office Sought: House Disburse	ment For:											
Senate President	Primary General Other (specify) ▼											
State: District:												
Full Name (Last, First, Middle Initial) C.			Date of Disburse	ement								
Mailing Address			M M / D	D / Y Y Y Y								
City	State Zip Code											
Purpose of Disbursement												
Candidate Name		Category/ Type		Disbursement this Period								
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	**										
SUBTOTAL of Disbursements This Page (optional).		_		868.69								
				9939.47								
TOTAL This Period (last page this line number only	J											

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER:		PAGE	14 OF	16
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only one)			24		
			27	28a	28b	28c	29	3
Any information copied from such Reports and States								
or for commercial purposes, other than using the nar	ne and addres	s of any politic	al committee to	solicit co	ntributions	from such o	ommittee.	
NAME OF COMMITTEE (In Full)								
> Seagrass PAC								
Full Name (Last, First, Middle Initial)								
A. Friends of David Jolly				Date of	Disburser		Y I Y I Y	
Mailing Address P. O. Box 1158				09	28		2015	
City		Zip Code		Trans	action ID	SB23.4195		
Indian Rocks Beach	FL ;	33785		ITAIIS	action ib	. 3023.4133		
Purpose of Disbursement contribution				Amoun	t of Each I	Disbursemer	nt this Peri	iod
Candidate Name			Category/				0700.00	
David W. Jolly			Type		-		2700.00	_
	ment For: 201							
Senate President	Primary Other (specify	General						
State: FL District:	Outer (specif)	() ▼						
Full Name (Last, First, Middle Initial)								
Friends of David Jolly				Date of	Disburser	ment		
				M = M	/ D	D / Y	YYY	
Mailing Address P. O. Box 1158				09	28	3 2	2015	
		Zip Code		Trans	action ID	: SB23.4196		
Indian Rocks Beach Purpose of Disbursement	FL	33785						
contribution				Amount	t of Each I	Disbursemer	nt this Peri	iod
Candidate Name			Category/					
David W. Jolly			Type				2700.00)
Office Sought: House Disburser	ment For: 20							
Senate	L.	Meneral Control						
President State: FL District:	Other (specify	() ▼						
Full Name (Last, First, Middle Initial)								
- Jeb 2016, Inc.				Date of	Disburser	ment		
Mailing Address P. O. Box 440669				07	29		2015	
00		7: 0 1						
City Miami		Zip Code 33144		Trans	action ID	: SB23.4182		
Purpose of Disbursement		00144						
contribution				Amount	t of Each I	Disbursemer	nt this Peri	iod
Candidate Name			Category/				0700.00	
Jeb Bush			Type		-	- 1	2700.00	
	ment For: 201							
Senate President	Primary Other (specify	General						
State: District:	Other (specify	() ▼						
States. Diotriot.								_
SUBTOTAL of Disbursements This Page (optional)							8100.00	
				-		1		=
TOTAL This Period (last page this line number only))							

SCHEDULE B (FEC Form 3X)	Lian announte anhadula(, FOR LINE	NUMBER: PAGE 15 OF 16
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlook orliy	•
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
Anninformation assist from such Departs and Otaton			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full)	71		
Seagrass PAC			
Full Name (Last, First, Middle Initial)			
^{A.} Jeb 2016, Inc.			Date of Disbursement
Mailing Address P. O. Box 440669			07 29 2015
Mailing Address P. O. Box 440009			29 2013
City	State Zip Code		T ID ODGG 4400
Miami	FL 33144		Transaction ID : SB23.4183
Purpose of Disbursement contribution			
Candidate Name			Amount of Each Disbursement this Period
Jeb Bush		Category/	2700.00
	nent For: 2016	Туре	7
Senate	Primary Seneral		
✓ President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
B. Justin Grabelle for Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P. O. Box 865			11 09 2015
City	State Zip Code		
Brooksville	FL 34605		Transaction ID : SB23.4211
Purpose of Disbursement			
			Amount of Each Disbursement this Period
contribution		11 11	
Candidate Name		Category/	2700 00
Candidate Name Justin Grabelle		Category/ Type	2700.00
Candidate Name Justin Grabelle Office Sought: House Disburser	nent For: 2016		2700.00
Candidate Name Justin Grabelle Office Sought: House Senate Disburser	Primary General		2700.00
Candidate Name Justin Grabelle Office Sought: House Disburser			2700.00
Candidate Name Justin Grabelle Office Sought: Yesident	Primary General		2700.00
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial)	Primary General		Date of Disbursement
Candidate Name Justin Grabelle Office Sought: Yesident	Primary General		
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial)	Primary General		Date of Disbursement
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865	Primary General Other (specify) ▼		Date of Disbursement
Candidate Name Justin Grabelle Office Sought: Yell Name (Last, First, Middle Initial)	Primary General Other (specify) State Zip Code		Date of Disbursement
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865 City Brooksville	Primary General Other (specify) ▼		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Yell Name (Last, First, Middle Initial)	Primary General Other (specify) State Zip Code		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: House Senate President State: FL District: 11	Primary General Other (specify) State Zip Code	Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865 City Brooksville Purpose of Disbursement contribution Candidate Name Justin Grabelle	Primary General Other (specify) ▼ State Zip Code FL 34605		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Yesident President Pres	Primary General Other (specify) ▼ State Zip Code FL 34605 ment For: 2016	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Yell Name (Last, First, Middle Initial)	Primary General Other (specify) ▼ State Zip Code FL 34605 ment For: 2016 Primary General	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865 City Brooksville Purpose of Disbursement contribution Candidate Name Justin Grabelle Office Sought: House Senate President Disburser	Primary General Other (specify) ▼ State Zip Code FL 34605 ment For: 2016	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Yell Name (Last, First, Middle Initial)	Primary General Other (specify) ▼ State Zip Code FL 34605 ment For: 2016 Primary General	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865 City Brooksville Purpose of Disbursement contribution Candidate Name Justin Grabelle Office Sought: House Senate President State: FL District: 11	Other (specify) General Other (specify) State Zip Code FL 34605 ment For: 2016 Primary General Other (specify) Other (specify)	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Name Justin Grabelle Office Sought: Senate President State: FL District: 11 Full Name (Last, First, Middle Initial) C. Justin Grabelle for Congress Mailing Address P. O. Box 865 City Brooksville Purpose of Disbursement contribution Candidate Name Justin Grabelle Office Sought: House Senate President Disburser	Other (specify) General Other (specify) State Zip Code FL 34605 ment For: 2016 Primary General Other (specify) Other (specify)	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Seagrass PAC	nents may not be sold or used the and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Tim Schock Campaign Mailing Address P. O. Box 320312			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code FL 33679		Transaction ID : SB29.4200 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For: 2016 Primary General Other (specify)	Category/ Type	1000.00
Full Name (Last, First, Middle Initial) Young Floridians for Opportunity Mailing Address 6332 Tanglewood Drive			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code FL 33702		Transaction ID : SB29.4188 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For: Primary General Other (specify) ▼	Category/ Type	1000.00
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
	State Zip Code		
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		·····•	2000.00
TOTAL This Period (last page this line number only).		······	2000.00